	PATENT	APPLICATIO	ļ	Application or Docket Number								
Effective October 1, 2003												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER SMALL	
TOTAL CLAIMS			12		<u> </u>			RATE	FEE	]	RATE	FEE
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FI	EE 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/ & minus 20=		• 0		1	X\$ 9=	:	OR	X\$18=	
INDEPENDENT CLAIMS					* 2	* 2		X43=		OR	X86=	172
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	_	OR	TOTAL	942
CLAIMS AS AMENDED - PART II									•	<b></b>	OTHER	
	(Column 1) (Column 2) (Column 3							SMALI	L ENTITY	OR	SMALL	
NT A	2/12/07	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	- 18	Minus	-21	0	=		X\$ 9=		OR	X\$18=	
AME	Independent	* 5	Minus	75				X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEP			PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTA ADDIT. FE	AL .	ا _ ا	TOTAL ADDIT. FEE	
		(Column 1) (Column 2) (Column 3)							E L	,] - ·	AUDII. FEE	
8		CLAIMS REMAINING		HIGHEST NUMBER		PRESENT	ÌΓ		ADDI-	1 1		ADDI-
		AFTER AMENDMENT		PREVIO PAID I	DUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
ENDMENT	Total	*	Minus	**		=	.	X\$ 9=	<u> </u>	OR	X\$18=	
₹	Independent	*	Minus	***		=		X43=		OR	X86=	
لنا	FIRST PRESENTATION OF MULTIPLE DEPEN				CLAIM			+145=		OR	+290=	
	(Column 1) (Column 2) (Column 2)								ב	'	TOTAL	
									E L	1	ADDIT. FEE	
		(Column 1) CLAIMS			(Column 2) (Column 3)				ADDI-	1 [		ADDI-
AMENDMENT C	<u>.</u>	REMAINING AFTER AMENDMENT		PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
ND	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
1ME	Independent	*	Minus	***		=		X43=		OR	.X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 4 46_		1	.200=	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE										OR	ADDIT. FEE	
		ber Previously Paid					r four	nd in the a	ppropriate box	x in col	umn 1.	